SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)		
Norma Torres for Congress		
Full Name (Last, First, Middle Initial) Carol Shea-Porter for Congress Mailing Address P.O.Box 453		Date of Disbursement M M M / D D / Y Y Y Y Y 10 24 2014
City State Rochester NH Purpose of Disbursement	Zip Code 03866	Amount of Each Disbursement this Period 2000.00
Contribution Candidate Name Carol Shea-Porter	Cate	Transaction ID : EXPB582 egory/ ype
State: NH District: 01		
Full Name (Last, First, Middle Initial) Friends of Lois Capps Mailing Address P.O.Box 23940		Date of Disbursement M M M / D M D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y
City State Santa Barbara CA Purpose of Disbursement Contribution	Zip Code 93121	Amount of Each Disbursement this Period 2000.00
Candidate Name Lois Capps	Cate	Transaction ID : EXPB577
Office Sought: Yes House Disbursement F		
Full Name (Last, First, Middle Initial) Friends of Pete Gallego		Date of Disbursement
Mailing Address P.O.Box 1781		M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City State San Antonio TX Purpose of Disbursement Contribution	Zip Code 78296	Amount of Each Disbursement this Period 2000.00
Candidate Name Pete Gallego Type		
Office Sought: House		
SUBTOTAL of Disbursements This Page (optional)		6000.00

TOTAL This Period (last page this line number only).....